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**TB CARE I**

## **TB CARE I - Uganda**

**Year 2  
Quarterly Report  
April-June 2013**

**July 30, 2013**

## Quarterly Overview

Reporting Country	Uganda	Technical Areas	%
Lead Partner	KNCV	1. Universal and Early Access	98%
Collaborating Partners		4. PMDT	89%
Date Report Sent	July, 30 2013	5. TB/HIV	100%
From	TB CARE I Uganda	6. Health Systems Strengthenin	100%
To	USAID Mission	7. M&E, Surveillance & OR	56%
Reporting Period	April-June 2013	Overall work plan completion	89%

### Most Significant Achievements

**End of TB CARE I Project Conference:** The conference which was held on June 21, 2013, drew more than 150 participants and was officially opened by the Minister of Health, Dr. Ruhakana Rugunda. The other dignitaries at the function included the acting USAID Mission Director, the KNCV Regional Executive Director, the Ministry of Health Director General for Health Services, Ministry of Health Assistant Commissioner for National Disease Control, the acting Programme Manager for the National TB/Leprosy programme, chiefs of party for implementing Partner projects and health workers. The key achievements of the TB CARE I project shared during the workshop include; a renovated state of art MDR TB isolation ward at Mulago national Referral Hospital, increase in the number of MDR TB patients put on treatment from about 20 to accumulative total of 90 patients in the 3 MDR TB supported sites (Mulago, Kitgum and Mbarara hospitals) and increase in TB treatment success rate in Kampala from 49% to about 70%. The conference further highlighted some of the challenges that need to be addressed to ensure sustainability of the gains achieved from the TB CARE I project and these include: nutritional support for patients; logistical issues such as transportation of TB patients to treatment centres; robust laboratory services to enable quick diagnosis; increase the number of health workers and their remuneration; and the need to development policies and guidelines especially for IPT implementation. In his opening remarks to the conference, the minister indicated that Government is committed to improving drug availability, human resource and ensuring that more treatment centres are availed throughout the country for quality patient care. The USAID Acting Mission Director pledged the agency's continuing commitment to the fight against TB through funding and other support while the KNCV Regional Executive Director appreciated the contribution made by TB CARE I to the national TB control efforts within such a short duration.

#### **Universal and Early Access:**

**Support supervisions to health facilities:** In the reporting period, 10 new private health facilities have been accredited by national TB/Leprosy Program (Ministry of Health) to provide TB services. Overall, there are now 48 public and private health facilities offering TB services in Kampala. The three data clerks recruited supported division TB Focal persons and the TB facilities in Kampala to clean TB patient records, follow up patients for better treatment adherence and compile data for quarterly case notification and treatment outcome returns. The data Clerks further supported TB treatment facilities to retrieve back patients who had missed clinic appointments and to obtain definitive treatment outcomes for patients lost to follow up and those transferred out. They did this through direct phone calls to patients, and during quarterly division/district data exchange meetings. For example, among the 213 patients who had missed clinic appointments for drug refill in April-June 2013, 63% (134) were successfully contacted through calls. Of these (134), 100 patients returned to treatment at their diagnosing clinics while 10 patients had self-transferred to other facilities where they were continuing treatment. With regard to follow up for treatment outcomes, a total of 1034 new smear positive TB patients were registered in Kampala during the period April-June 2012 (Q2 2012). of these, 256 patients had no specific treatment outcome data in the patient registers and were regarded as "lost to follow up". Through calls, 33% (86) were contacted and 54 of these were confirmed to have completed treatment. Another 113 of the same cohort (April-June 2012) were transferred out. Through phone calls and data exchange meeting, 57 patients of those transferred out were found to have completed treatment. These 111 patients (54 and 57) contributed to the overall treatment success rate for the quarter. Without this inovative follow up method, these patients would not have been easily discovered to have completed their treatment. Health facility and division TB registers were accordingly updated. Other activities conducted during the quarter included five divisional performance review meetings which provided opportunity for Kampala City Health officials together with TB facility providers to work out corrective solutions to address health facility level performance gaps that were highlighted during these meetings.

For the April-June 2012 treatment outcomes, the data clerks supported data compilation for the 35 individual health facilities visited and for the aggregated division returns. Treatment success rate for new smear positive patients (TSR) for this quarter was 69%; an increase of 8% from the first quarter (Q1 TSR 61%). The default rate dropped to 24% in Q2 from about 27% in Q1.

#### **Programmatic Management of Drug Resistant TB (PMDT)**

**Mulago MDR TB ward hand over:** The State of the art MDR-TB 39 bed capacity isolation ward at Mulago hospital which was remodeled, renovated and equipped with funding from USAID through TB CARE I Project was officially handed over to Mulago hospital administration on June 18, 2013. The occasion was Presided over by the Executive Director of Mulago national referral hospital. With the support of TB CARE I and TRACK TB, the hospital administration is working to put in place arrangements to provide in-patient food for the MDR-TB ward in order to make it fully functional. To date, only one MDR TB patient is admitted.

**Recruitment of additional Staff:** TB CARE I has supported salaries for 3 additional staff (1 Clinical Officer, 1 Enrolled Nurse, and 1 Counselor) recruited by Kitgum District for the MDR-TB program in Kitgum Hospital. TB CARE I has also worked with Mulago Hospital to recruit 5 additional medical staff (2 medical doctors and 3 Registered nurses) for the Hospital TB Unit. The Hospital recruited these additional staff under the hospital private scheme arrangement and hopes to formally absorb them later. TB CARE I supported their June salaries.

**Increased enrolment of MDR patients:** During the reporting period, a total of 38 MDR TB patients have been initiated on treatment in the 3 supported MDR TB sites, with 24 (63%) patients in Mulago national referral hospital, 8 (21%) in Mbarara Regional Referral Hospital and 6 (16%) in Kitgum District Hospital.

**Active search for MDR-TB patients:** Since the institution of routine MDR-TB surveillance through a sputum referral system by the national TB Reference Laboratory (NTRL) in 2008, an estimated 300 patients had been detected by 2012. When a program for MDR-TB treatment was rolled out in 2012, the focus was on finding patients in and around Kampala. However, about half of these patients were thought to be in the country side and need to be traced. In May 2013, TB CARE I supported an active search exercise. By the close of June 2013, visits had been made to 112 MDR-TB patient households out of over 200 patients. Of these, 50 MDR-TB patients not yet on treatment were found and are being linked to points of treatment.

**Capacity building:** TB CARE I organized and provided funding support for 14 health workers to attend an international MDR TB training at the center for Excellence in Kigali, Rwanda. The beneficiaries of this round of training came from the 3 supported MDR-TB sites, from the NTLP Central Unit, and from 4 other regional hospitals (Mbale, Gulu, Arua and Fort portal). This training was intended to create capacity to support the national TB /Leprosy Program scale up the MDR-TB treatment program to more regional hospitals.

**Nutritional Supplement distribution to MDR TB Patients:** A report by Nutritionist consultant procured by TB CARE I to assess the nutritional needs of MDR-TB patients indicated that nearly all MDR-TB patients on treatment had some degree of malnutrition with severe acute malnutrition in about 63% of the patients. The report also recommended RTUF (Plumpy nut) for acute malnutrition and cereal based feeds for moderately malnourished patients. In this reporting quarter, TB CARE I procured and supported distribution of locally produced cereals based foods to MDR-TB patients enrolled on treatment in the 3 supported MDR-TB sites. MSH- TRACK TB plans to procure RTUFs for the acutely malnourished patients and will later take over the support for procurement and distribution of cereal foods as well.

**GIS capacity building and mapping:** TB CARE I is contributing towards the implementation of the PMDT Expansion Plan by using Geographical Information System (GIS) applications. During this reporting quarter, 21 health workers drawn from Mulago National Referral Hospital, 6 other MDR-TB treatment sites (Arua, Mbale, Kitgum, Fortportal, Mbarara and Gulu hospitals), NTLP, KCCA, TB CARE I and TRACK TB successfully completed 5 day GIS mapping training. To ensure that the already established GIS databases and the maps generated thereby are updated in order to be of use for timely decision making, TB CARE I procured and provided GIS softwares; two computers; and two GPS to Kitgum and Mbarara districts. TB CARE I also supported KCCA to map 128 (88%) out of 145 public and private health facilities offering TB services in the five divisions of Kampala. The remaining facilities could not be mapped because of failure to trace their physical location by the mapping team. KCCA will work with NTLP to ensure that the location of the remaining facilities are traced and mapped. The GIS information provided through this exercise will guide KCCA in reviewing their current strategies to improve the TB treatment outcomes in Kampala as well as sustain the interventions done under the TB CARE I Project.

KCCA has also completed the recruitment of a GIS specialist and the presence of the personnel will further re-enforce sustainability of GIS use to improve service delivery within the institution including MDR TB.

#### **TB/HIV:**

TB CARE I coordinated and supported NTLP and ACP, and other partners to conduct a second round of support supervision to selected districts in the NTLP zones. A total of 58 districts were visited during the joint support supervision exercise covering 8 zones and 229 health facilities both public (223) and private (6). The supervision visits focused on TB/HIV Case management, recording and reporting, TB infection control measures and management of TB drug supplies. Data entry and cleaning has been completed. Data analysis and report writing is now on-going and expected to be finalized in July, 2013.

With support from TB CARE I, the TB/HIV National Coordination Committee (NCC) held one quarterly meeting in this period. The main purpose of this meeting was to review and adopt for approval a draft second edition of the TB/HIV National Policy guidelines. This document is an essential support for coordinating implementation of TB/HIV collaborative activities particularly at service delivery points.

The draft document was adopted by the NCC and recommended for onward submission to the Ministry of Health technical and Senior management committees for review and approval. In this meeting, TB CARE I officially handed over coordination responsibilities of the NCC to MSH-TRACK TB.

#### **Health Systems Strengthening**

**Support towards Supranational Reference Lab launch:** TB CARE I provided initial support towards the preparations to launch the NTRL in Uganda as a Supranational TB Reference Laboratory. TB CARE I hired events manager who followed up activity implementation. The event is scheduled for July, 11, 2013. The project also supported NTLP to print the M&E component of the NTLP National Strategic Plan.

#### **Overall work plan implementation status**

With the approval in January 2013 of APA 2B budget and a no cost extension of three months, a new work plan was drawn in Q1 that contained new and scaled up activities from the initial workplan. To date, 89% of the work plan has been implemented (APA 2A and 2B combined). Major activity project implementation stopped on June, 28 2013. A few staff have been retained to complete selected

#### **Technical and administrative challenges**

One key administrative challenge is the current understaffing in the finance department and this has created heavy workload in the department. Retaining staff during the quarter in the knowledge of the impending end of the project was always a technical challenge. Recruitment process for the vacant position of M&E Officer was completed and the officer reported to work in May, 2013.

#### **In-country Global Fund status and update**

In Q2, additional order for first line Anti-TB drugs worth USD 2.5M was placed with the Global Drug Facility (GDF). Global Fund has also allocated USD 2.1M for the TB prevalence survey to be conducted across the country this year. The preparation for the survey is progressing well and the following activities have been completed; survey protocol finalized and approved, survey consultant contracted (Makerere University School of Public Health) and signed MoU with Ministry of Health and survey coordinator recruited. The pre-testing of survey tools and piloting is expected to be conducted in July and August respectively. Global fund has further supported recruitment of 3 staff members and hiring of office space for the Uganda Stop TB Partnership Secretariat (USTP). Two additional staff to support the NTLP have also been recruited. Global Fund has also dedicated funds to support the NTLP conduct a TB program Review and for MDR-TB patient support.

Quarterly Technical Outcome Report								
Technical Area	1. Universal and Early Access							
Expected Outcomes	Outcome Indicators	Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year	Y2		
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.2.5 Number (and percent) of facilities in Kampala covered by support supervision visits Indicator Value: Number/Percent Level: Kampala Source: NTP records Means of Verification: Project technical and financial reports Numerator: Number and type of facilities in Kampala covered by support supervision visits Denominator: Total number of facilities in Kampala providing TB control services	8/36	2011	18/36	2012	48/38	Ministry of health accredited more private facilities (10) as TB treatment facilities within Kampala. TB CARE I has had to scale up its support to cover the additional sites. All the 48 HFs were visited and the focus of the supervising teams has been on streamlining data recording and reporting, tracing for TB defaulters, rectifying drug stock out issues	
	1.2.8 Number of defaulters receiving monthly SMS for treatment adherence Indicator Value: Number Level: Kampala Source: NTP Means of Verification: Project technical and financial records Numerator: Number of defaulters in Kampala receiving SMS	N/A	2011	700	2013	0	Activity was not conducted because of failure to get clearance from the e-health review committee of the Ministry of Health to send sms for treatment adherence to TB patients.	

Technical Area	4. PMDT							
Expected Outcomes	Outcome Indicators	Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year	Y2		
4.1 Improved treatment success of MDR	4.1.2 MDR TB patients who are still on treatment and have a sputum culture conversion 6 months after starting MDR-TB treatment Indicator Value: Percent Numerator: Number of MDR TB patients in a cohort who are still on treatment and had culture conversion latest at month 6 (having had 2 negative sputum cultures taken one month apart and remained culture negative since) Denominator: Total number of MDR patients who started treatment in the cohort.	NA	2011	70%	2012	83%	MDR TB patient cohort data was collected from 3 sites including Mulago national referral hospital, Arua and Kitgum regional referral hospitals. 100% MDR TB patients in Arua RRH were reported to be still on treatment and had 2 negative sputum cultures taken one month apart and remained culture negative since. Whereas, in Kitgum and Mulago, 92% and 50% of the MDR TB patients were still on treatment and had 2 negative sputum results respectively.	<b>Next steps:</b>
	4.1.5 Number of diagnosed MDR-TB patients who are enrolled on treatment Indicator Value: Number Level: National Source: Quarterly reports Means of Verification: MDR TB register Numerator: Number of MDR TB patients enrolled on treatment	17	2011	60	2012	110	During the April-June 2013 reporting period, in total 38 MDR TB patients were put on treatment in the 3 MDR TB supported sites (Mulago=24, Kitgum=6 and Mbarara=8. Overall, the total number of MDR TB patients put on treatment since 2012 to June 2013 in the 3 TB CARE I supported sites is 110.	<b>Next steps:</b> Hidden MDR TB diagnosed patients will continue to be traced and put on treatment.
	4.1.6 Number of MDR-TB beds made available through renovation of wards in Mulago hospital Indicator Value: number Level: Hospital Source: NTP records Means of Verification: Project technical and financial reporting Numerator: Number of beds	0	2011	30	2012	49	49 beds were distributed to both Mulago (39) and Mbarara (10) fully complete with mattresses, bedsheets and blankets. The beds are now being used by the MDR TB patients in the respective health facilities	<b>Next steps:</b> Scale up initiation of MDR TB patients on treatment







Technical Area	5. TB/HIV							
Expected Outcomes	Outcome Indicators	Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year	Y2		
5.2 Improved diagnosis of TB/HIV co-infection	5.2.4 TB CARE-supported supervisory visits conducted Number of TB CARE's support of NTP's supervisory activities to 9 NTLP Zones Description: This indicator denotes the number of supervision visits TB CARE has supported NTLP to conduct to the 9 NTLP Zones Indicator Value: Number Level: Zonal Level Source: TB CARE Project Means of Verification: Supervisory reports Numerator: Number of TB CARE-supported supervisory visits conducted.	0	2011	9	2013	9	Second round of Joint TB/HIV support supervision was completed in Q2, 2013. In total, 58 districts covering 9 zones and 229 health facilities were visited.	<b>Challenge:</b> Competing tasks for the supervisors delays the support supervision visits . <b>Next steps:</b> Data analysys and preparing consolidated 2nd Joint Support supervision report is on-going.
5.3 Improved treatment of TB/HIV co-infection	5.3.3 Number of TB/HIV National coordination committee meetings supported Indicator Value: Number Level: National Source: Project reports Means of Verification: Meeting minutes	0	2011	5	2012	5	Held the 5th TB/HIV National Coordination Committee meeting in Q2, 2013. During the meeting, NCC adopted the proposed second edition of the TB/HIV/AIDS Policy guidelines and recommended it to be submitted to the Ministry of Health for approval. TB CARE I smoothly handed over TB/HIV NCC tasks to TRACK TB.	<b>Next steps:</b> The subsequent NCC meetings will be supported by TRACK TB.
	5.3.4 Number of joint bi-annual supervision visits conducted Indicator Value: Number Level: National Source: Project reports Means of Verification: Supervision reports	0	2011	9	2012	9	First round of Joint TB/HIV support supervision visits to all 9 NTLP zones concluded in 2012. Report compiled and disseminated to different stakeholders.	








Technical Area	6. Health Systems Strengthening							
Expected Outcomes	Outcome Indicators	Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year	Y2		
6.2 TB control components (drug supply and management, laboratories, community care, HRD and M&E) formed integral part of national plans, strategies and service delivery of these components	6.2.3 People trained using TB CARE funds Indicator Value: Number of people Numerator: Number of people trained disaggregated by gender and type of training.	NA	2011	478	2013	68	Two trainings were conducted in April-June 2013. GIS mapping training for health workers in supported health facilities. 21 participants (male=11, female=10) successfully completed the GIS training. International MDR TB training for health workers in supported health facilities was conducted, with 14 attendees (male=8, female=6)	<u>Next steps:</u> GIS staffs trained will continue to update the databases to keep the maps current. The MDR TB trained participants will support PMDT management and the roll out efforts of enrolling MDR TB patients on treatment in the country.
	6.2.4 National TB strategic plan finalized Indicator Value: Yes/No Level: National Source: Project reports Means of Verification: National Strategic Plan	No	2011	Yes	2012	Yes	National TB Strategic Plan (2012/13-2014/15) finalised	
	6.2.5 Annual Implementation Plan developed Indicator Value: Yes/No Level: National Source: Project reports Means of Verification: Annual Implementation Plan	No	2011	Yes	2013	Yes	Annual Implementation Plan (2012/13) finalised	

















Technical Area	7. M&E, Surveillance & OR							
Expected Outcomes	Outcome Indicators	Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year	Y2		
TB Surveillance Strengthened	7.1.1: Percentage of health facilities analysing TB treatment outcome data on a quarterly basis Description: This indicator denotes the proportion of health facilities providing TB treatment within Kampala that are analysing TB treatment outcome data on a quarterly basis Indicator Value: Percent Level: Kampala Source: Health Facility Quarterly Reports Means of Verification: Reviewing Health Facility Quarterly Reports Numerator: Health facilities providing TB treatment within Kampala and are analysing TB treatment outcome data on a quarterly basis Denominator: All health facilities providing TB treatment within Kampala	2/38	2011	19/38	2013	38/38	TB Focal Persons of the 38 supervised facilities were supported to compile and analyze their April-June Outcome treatment data	<b>Next steps:</b> Support TB Focal Persons to translate the information generated into knowledge and action
	7.2.12: Geographical Information System for Kampala Health Facilities TB control and MDR TB management established Indicator Value: Yes/No Level: Kampala/National Source: Project reports Means of Verification: Review of project reports	No	2011	Yes	2013	Yes	GIS databases for Kampala and MDR TB treatment for Kitgum, Mbarara and Mulago have been established and fully functional	<b>Next steps:</b> The trained staffs will continue to update the databases to keep the maps current. One more database was designed for KCCA during April-June period







## Quarterly Activity Plan Report







1. Universal and Early Access						Planned Completion		
Outcome	Activit y #	Activity	Activity Leader	Approve d Budget	Cumulativ e Completio n	Month	Year	Cumulative Progress and Deliverables up-to-date
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.2.1	Conduct quarterly supervisions by two zonal supervisors and monthly supervisions by six division supervisors	KNCV	32225	 100%	Monthly & Quarterly (January)	2013	In total, 48 health facilities (KCCA and NTLP have accredited 10 new private facilities as TB treatment units) were visited and supported by a team including the Kampala Zonal TB supervisor, KCCA TB control officer, Division TB Officer, TB CARE I Technical Officer and TB CARE I Data clerks. Streamlining data recording and reporting, tracing for TB defaulters, rectifying drug stock out issues were the key issues handled this quarter
	1.2.2	Conduct 2 trainings of 18 supervisors, by 4 facilitators for 5 days	KNCV	4533.333	 100%	April	2012	Completed in November 2012
	1.2.3	Revise & print 10,000 patient cards, unit Reg 200 copies Division Reg 30 copies	KNCV	3166.667	 100%	April	2012	Patient cards and registers printed and distributed to all the facilities.
	1.2.4	Send reminders to patients by mobile phone and provide monthly airtime to facilities for defaulter retrieval	KNCV	40755	 100%	Monthly (Jan)	2013	A total of 38 health facilities were supported with monthly airtime for defaulter retrieval.
	1.2.5	Procure two computers for two zonal supervisors	KNCV	2400	 100%	March	2012	Activity completed by April 2012.
	1.2.6	5 meetings of 6 DTLS' for 3 days each	KNCV	3750	 100%	Monthly (Jan)	2013	5 meetings so far held; April, July, October 2012 and January, May 2013. The meetings are used to harmonize division data so as to improve reporting and treatment outcomes.








1.2.7	A GIS will be designed to monitor case holding and defaulters as well as MDR patients	KNCV	4800		100%	January	2013	GIS for Kampala DOTS and MDR TB has been done and maps produced
1.2.8	1 day training of field staff and 3 days of field work	KNCV	3526.667		100%	March	2012	Activity conducted in April-May. It was an assessment of TB control activities within Kampala city health facilities and divisions. The findings have been used to re-align interventions to address the problems in Kampala
1.2.9	Two technical officers will visit 10 neighboring districts for five days for the last 3 quarters	KNCV	12500		80%	January	2013	In Q1, Lists of 2012 transferred patients to other districts was compiled. In Q2, the newly recruited data clerks were able to trace out 87 patients out of the 113 transferred to other districts. Among the 87 traced, 13 MDR TB patients were reported to have cured, 57 completed treatment, 15 defaulted. Only one patient failed and died respectively.
1.2.10	A lessons learned document will be developed, printed and disseminated based on experience with support of local consultant	KNCV	1416.667		100%	January	2013	Documentation of the lessons learnt was completed and some of the lessons learnt were shared during the TB CARE I end of project conference
1.2.11	International TA to build capacity of the local team and monitor the quality of implementation	KNCV	33762		100%	June	2012	Local TA was contracted to study and improve DOTS implementation within Kampala. Disseminated the findings to NTLP and TB control implementing partners
1.2.12	Two coordination meetings per month	KNCV	3500		100%	January	2013	6 NTLP coordination bi-weekly meetings were supported by TB CARE I project during the January-March 2013 quarter. Majority of the meetings were used to coordinate preparations for the World TB Day/Week activities
					98%			

4. PMDT								
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
4.1 Improved treatment success of MDR	4.1.1	IC consultant 2 missions (the first mission (Max+Merid) already took place in October 2011). The second mission will take place in the 3rd quarter.	KNCV	27717.51	 100%	October	2012	TB infection control assessment was done in November 2011. Infection control consultant from KNCV HQ conducted PMDT TA in September 2012 that involved reviewing infrastructure in Mulago hospital in relation to infection control guidance, reviewed BoQs, provided guidance to the MDR TB ward renovation supervisors and was involved in the selection of the contractor to renovate the ward.
	4.1.2	Remodeling of MDR-TB unit. 2 wards each with 3 isolation rooms for XDR	KNCV	270000	 100%	July	2012	Remodeling of the Mulago MDR TB ward completed and officially opened on March 19, 2013. The state of art MDR TB ward has been officially handed over to Mulago administration on 18, June 2013.
	4.1.3	500 copies will be printed and disseminated	KNCV	4166.667	 100%	March	2012	Guidelines for TB Infection control copies printed and dissemination in July 2012
	4.1.4	20 selected staff 5 days, non residential	KNCV	3862.5	 100%	August	2012	14 health workers received MDR TB training in Rwanda in the April-June 2013 quarter
	4.1.5	60 patients (30 x 2) will be supported through max. 60 local clinics	KNCV	29250	 3%	January	2013	In the reporting period, only one MDR TB patient was admitted out of 39 expected in the newly renovated MDR TB ward. This has been due to lack of food for the In-patients. With the support of TB CARE I and TRACK TB, the hospital administration is working to put in place arrangements to provide in-patient food for the MDR-TB ward in order to make it fully functional. TB CARE I plans to procure in-patient and cereal based foods for ambulatory patients during the period July to September and TRACK TB will takeover thereafter.
	4.1.6	6 staff from MDR-TB unit and NTLP will be trained at CoE in Kigali	KNCV	10716	 100%	Sept	2012	9 MDR TB health workers (6 male and 3 female) oriented about MDR TB at the Centre of Excellence in Kigali, Rwanda









4.1.7	2 fridges for storage of PAS	KNCV	2000		100%	July	2012	1 fridge procured and handed over to Mulago in the April-June period. Additional 2 small fridges procured and handed over to NTLP during the October-December 2012 quarter
4.1.8	Procure audiometer	KNCV	5000		100%	July	2012	Audiometer procured and handed over to Mulago (through the NTLP). This item was part of the ward equipment provisionally delivered to Mulago Hospital for patient care as we await the official asset disposition.
4.1.9	3 Missions	KNCV	51922.53		100%	Dec	2012	All 3 missions conducted. The 3rd mission was conducted in March 2013; a one-week International TA to test the air flow mechanism of the new renovated ward of Mulago and assess structures in Masaka, Arua, Gulu and Mbale regional referral hospitals identified as isolation units for MDR TB
4.1.10	Dr. Samuel Kasozi will provide full-time support for the project	KNCV	25000		100%	March	2013	Dr. Samuel Kasozi's replacement continued to support NTLP on MDR TB issues. Activities in the quarter included supporting the international TA missions, training Fort Portal health workers on PMDT, updating lists of patients waiting to start MDR TB treatment
4.1.11	Central PMDT team will be revitalized through training and regular meetings	KNCV	1458.333		100%	July	2012	Central PMDT team formed and oriented during the July-September quarter. Team is fully functional
4.1.12	A writing team will be formed and a stakeholders meeting will be organized	KNCV			100%	July	2012	PMDT roll out plan endorsed and is now operationalised.
4.1.1B	Beds and Mattresses for Mulago and Mbarara	KNCV	31064.92		100%	March	2013	49 beds and mattress which were procured have been distributed to both Mulago (39) and Mbarara (10) hospitals during this quarter
4.1.2B	Plastic sheets and Mosquito nets	KNCV	1964		100%	March	2013	The Plastic sheets for all the 49 mattresses have been distributed in Q2, 2013. Procurement of mosquito nets was completed and they were distributed to the respective health facilities







4.1.3B	Fridges to store MDR TB Medicines for Mbarara and Kitgum	KNCV	2500		100%	April	2013	The two friges were delivered to Mbarara and Kitgum in Q2, 2013.
4.1.4B	Respirators and surgical masks	KNCV	8692.5		100%	March	2013	720 N-95 masks and 150 surgical masks delivered to Mulago, Kitgum and Mbarara
4.1.5B	Tracing unknown MDR patients	KNCV	8350		85%	March	2013	In the reporting period, TB CARE I hired MDR TB consultant to conduct MDR TB Patient Active search. Through the search, 50 MDR TB patients not on treatment were identified. More cases were still being traced in the subsequent month and efforts are being made to ensure all the MDR TB patients are put on treatment
4.1.6B	Nutritional assesment nutritional Counselling tools from one of the USAID Partner	KNCV	0		100%	March	2013	Consultant contracted and a Nutritional assessment conducted for MDR TB patients on treatment in Mulago, Mbarara and Kitgum hospitals.
4.1.7B	World TB Day	KNCV	38245		100%	March	2013	TB CARE I provided support to NTLP to hold the World TB Day/Week activities. This included holding a high level meeting with city authorities, prison and police and funding for the World TB Day
4.1.8B	Plumpy nut from USAID IP	KNCV	0		20%	June	2013	In Q1, Plans were underway to acquire plumpy nuts from a USAID IP. In Q2, we only procured cereal based foods for ambulatory patients. However, we were unable to liaise with a USAID IP to provide the RTUF (Plumpy nuts) for the acutely malnuourished patients. The new USAID funded-TRACK TB is working with Baylor Uganda to avail plumpy nut for the acutely malnourished patients and will later take over the procurement and distribution of other food support needs for MDR-TB patients as well (in-patients food and cereal-based foods for ambulatory patients).





4.1.9B	Food support items	KNCV	20000		100%	June	2013	The nutritional supplements were delivered to the MDR TB patients in Mulago, Kitgum and Mbarara per the recommendations of the Nutrition consultant. The last assignment of the cereals will be delivered in the month of July
4.1.10B	Liaise with a USAID IP for Agricultural T/A	KNCV	0		0%	June	2013	The activity was not done since It was not feasible
4.1.11B	Local long term TA for PMDT	KNCV	4999.8		100%	June	2013	Local TA contracted to support Mulago hospital PMDT. To date he's been able to streamline and coordinate MDR TB activities in Mulago, tracing of patients awaiting treatment, implementation of the ambulatory care phase for patients. The MDR-TB patient treatment enrolment target for the 3 supported sites was 60 patients with about 50% expected to be enrolled in Mulago Hospital. In the period April-June, the local TA supported Mulago Hospital to enrol 24 MDR-TB patients onto treatment.
4.1.12B	Support supervision for follow up health facilities	KNCV	10218.75		80%	June	2013	During Q2, 74 health center workers were inducted in MDR TB related topics and drug refills by the highly trained MDR TB staffs from Mulago and Kitgum. In total, 126 HFs were followed up both by Mulago and Kigtum MDRT TB teams.
4.1.13B	Supervision for community & patient follow up	KNCV	2400		80%	June	2013	During this Q2, 150 home visits were made by health workers from Mulago and Kitgum, where they were able to review patient clinical conditions and sensitize the community before discharging the MDR TB pateints.
4.1.14B	Setting up and training 2 PMDT Panels Regional hospitals in Rwanda	KNCV	23734.08		100%	May	2013	In this reporting period, 3 PMDT panels received MDR TB training in Rwanda

	4.1.15B	MDR TB patients transportation	KNCV	27200	 100%	June	2013	A mechanism of disbursing daily travel refund to patients was instituted last quarter. In Q2, 40 MDR TB patients in Mulago hospital were facilitated with transport refund. This has been only implemented in one site ie Mulago, since the other 2 sites deliver the drugs during their patient home visits
	4.1.16B	Recruitment of additional MDR TB health care workers (Addressing human resource gap at the three health facilities)	KNCV	28500.1	 100%	May	2013	During this Q2, TB CARE I supported the recruitment of 3 health workers at Kitgum district to support MDR TB service delivery. Also 5 additional medical staff (2 doctors and 3 nurses) were recruited to support TB service delivery at Mulago national referral hospital
	4.1.17B	3 tablets/laptops for 3 MDR TB sites and 1 Laptop for MDR TB Coordinator	KNCV	8050	 100%	May	2013	3 tablets/laptops for 3 MDR TB sites and 1 Laptop for MDR TB Coordinator delivered in this quarter 2013
	4.1.18B	Recognition of performance through ceremony	KNCV	12000	 100%	June	2013	During the conference, 10 institutions were recognised and given low incentives such as wall clocks instead of computers that were earlier planned
					 88.9%			
5. TB/HIV						Planned Completion		
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
5.2 Improved diagnosis of TB/HIV co-infection	5.1.1B	TB/HIV joint support supervision in all the zones	KNCV	32422.53	 100%	June	2013	Second round Joint Support supervision was conducted in 2013, covering 58 districts and 229 HFs.
5.3 Improved treatment of TB/HIV co-infection	5.3.1	9 teams per NTLP zone, each 2 officers, 1 vehicle/team, 1 driver per team, 2 visits/year for 10 days	KNCV	36187.5	 100%	January	2013	First round of TB/HIV joint support supervision visits conducted in 2012.



	5.3.2	5 Quarterly meetings of 1 day	KNCV	1979.167	 100%	May	2013	Five TB/HIV National Coordination Committee meetings have been held. NCC meeting adopted the proposed second edition of the TB/HIV/AIDS Policy guidelines and recommended to be submitted to the Ministry of Health for approval in Q2. TB CARE I has already handed over the tasks of supporting the subsequent NCC meetings to TRACK TB.
	5.3.3	Salaries of 6 none governmental staff to complete HAART study	KNCV	31032	 100%	December	2012	Payments to TB HAART study staff were made for months of January to December 2012. Continuation granted and TB HAART staff paid for the April-June 2013 quarter
					 100%			
6. Health Systems Strengthening						Planned Completion		
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
6.2 TB control components (drug supply and management, laboratories, community care, HRD and M&E) formed integral part of national plans, strategies and service delivery of these components	6.2.1	Non residential workshop of 15 TWG members of 3 days each	KNCV	1239.583	 100%	June	2012	Conducted in December 2012 for TWG members to finalise the National TB Strategic plan and finalise the annual implementation plan for 2012/13
	6.2.2	1 day workshop for stakeholders to review and give inputs to the draft for finalization	KNCV	2395.833	 100%	May	2012	National TB Strategic Plan stakeholders' review workshop held in September 2012
	6.2.3	Printing 1000 copies	KNCV	8333.333	 100%	June	2012	Delivery of the 1000 copies printed was made in this quarter 2013.
	6.2.4	Two day workshop for stakeholders	KNCV	2500	 100%	June	2012	National TB Strategic Plan workshop that provided insight in drafting of the plan held in August 2012
	6.2.5	One day meeting quarterly	KNCV	8020.833	 100%	Quarterly (January)	2013	All 4 coordination meeting for the STOP TB partnership have been held.

	6.2.6	Car maintenance, car rental, procurement of motorbikes	KNCV	38437.5		100%	March	2013	Routine maintenance of three NTLP vehicles as well as one MDR TB vehicle for Kitgum hospital was done. 3 motorcycles for the Division supervisors were procured after tax clearance from Ministry of Finance. The 3 motorcycles recently have been handed over to TRACK TB with a full directive from USAID Mission in Uganda
	6.2.7	One TA for finalizing the national strategic plan	KNCV	1500		100%	May	2012	Local TA contracted and National TB Strategic plan finalised
	6.2.8	One TA to prepare annual implementation plan templates, facilitating the stakeholders and assisting NTP to prepare the plan	KNCV	1500		100%	June	2012	Local TA contracted and annual implementation plan NTLP 2012/13 has been completed
	6.2.9	International TA to build capacity of the local team and monitor the quality of implementation	KNCV	33761.77		100%	November	2012	Dr. Rene (Head, KNCV-Unit Africa) provided 1 week TA to the local team during March. Discussions also included preparations for the project closure.
						100%			
7. M&E, Surveillance & OR							Planned Completion		
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date	
TB Surveillance Strengthened	7.1.1B	On site training for health workers on data management	KNCV	3483.209	 30%	June	2013	In Q1 , the Technical Officer together with the newly recruited data clerks conducted on site TB data management inductions to health workers within Kampala facilities. In Q2, the activity was not implemented due to time constraint.	
	7.1.2B	Monthly TB performance review meetings in 38 health facilities	KNCV	23351	 30%	June	2013	In Q1, 6 health facility review meetings were conducted in the month of March 2013. TB data (2012) specific to that particular health facility is shared with staff, it's critically reflected upon and is used to set targets for 2013. In Q2, this activity was not undertaken due to time constraint	

7.1.3B	Health Facility TB Exchange visits to TB Data better performing health facilities	KNCV	1999.99		20%	June	2013	In Q1 Preparations were finalised to start exchange visits to better performing health facilities as a way of improving performance in weak facilities. In Q2, this activity was not conducted due to time constraint
7.2.1B	Design and implement a GIS for TB & MDR TB in the 3 sites of Mulago, Kitgum and Mbarara	KNCV	48285.42		100%	May	2013	In Q1, MDR TB GIS databases for Mbarara, Kitgum, Mulago and KCCA were designed. In Q2, a total of 21 participants were trained in GIS and equipped with GPS gadgets such as GIS software, GPS, laptop/computer and printers for the 3 sites. The trained staffs will be able to update the databases to keep the maps current and used for evidence based decision making
7.2.2B	Follow up coaching visits at health on data : (In addition Hire 3 data clerks to follow up)	KNCV	9015		100%	June	2013	In the reporting period, the 3 Data Clerks supported 38 health workers in the cleaning process of the paper based recording and reporting systems in the 38 health facilities and 5 division registers.
					56%			

## Quarterly MDR-TB Report

Country	Uganda
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Period	April - June 2013
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### MDR TB cases diagnosed and put on treatment in country

Quarter	Number of MDR cases diagnosed	Number of MDR cases put on treatment
Total 2010	86	9
Total 2011	71	7
Jan-Mar 2012	7	0
Apr-Jun 2012	8	3
Jul-Sep 2012	24	21
Oct-Dec 2012	70	20
Total 2012	109	44
Jan-Mar 2013	30	28
Apr-Jun 2013	38	41
Total to date	296	129

Quarterly Photos (as well as tables, charts and other relevant materials)



*KNCV Representative, Hon, Minister of Health, USAID Representative listening to a presentation during the Conference*



*Conference attendees at Speke Resort Munyonyo, Kampala*

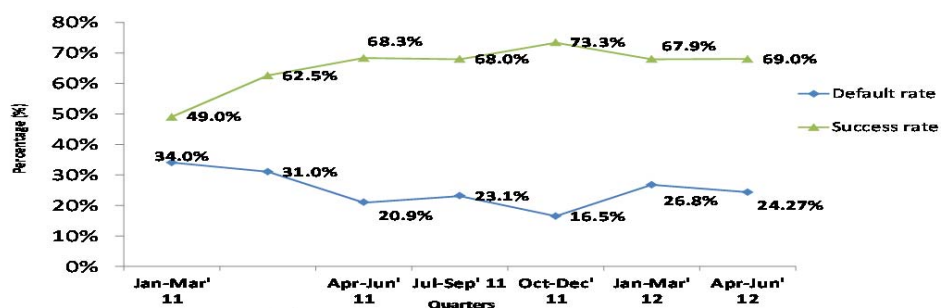


*Chief of Party and Deputy Chief of Party TB CARE I, handing over the motorcycle keys and other related documents to Deputy of Chief Party, TRACK*



*Chief of Party TB CARE I, handing over the State of Art MDR TB ward documents to the Executive Director of Mulago NRH.*

## DOTS in Kampala - Improve in TB Treatment Success



**USAID**  
FROM THE AMERICAN PEOPLE



**KNCV**  
To eliminate TB



**TUBERCULOSIS FOUNDATION**

**TB CARE I**

## Inventory List of Equipment - TB CARE I



TB CARE I

<b>Organization:</b>	<b>TB CARE I</b>
<b>Country:</b>	<b>Uganda</b>
<b>Reporting</b>	<b>Quarterly Report April-June 2013</b>
<b>Year:</b>	<b>APA 2</b>

Description (1)	Engraved numbers	ID numbers (2)	Acquisition date (3)	Acquisition cost (4)	V.A.T (5)	Location (6)	Condition (7)	Disposition date (8)	Title held by (9)	Insurance policy #
Motor vehicle		5L-6071939/JTEBK29J10-0034230	25.05.2012			Kololo Office	Unknown, not driven		USAID	Not yet insured
Motor Cycle UDX 130Z - Honda/ CGL 125		Engine no.WH156FMI211B74961/C hassis no.LWBPCJ1F9B1013413	12.04.2013	5,021,186	903,813	TRACK TB	Good	28.06.2013	KNCV/TB CARE I	0112001488
Motor Cycle UDX 131Z - Honda/ CGL 125		Engine no.WH156FMI211B71491/C hassis no.LWBPCJ1F1B1012613	13.04.2013	5,021,186	903,813	TRACK TB	Good	28.06.2013	KNCV/TB CARE I	0112001488
Motor Cycle UDX 132Z - Honda/ CGL 125		Engine no.WH156FMI211B74962/C hassis no.LWBPCJ1F5B1013411	15.04.2013	5,021,186	903,813	TRACK TB	Good	28.06.2013	KNCV/TB CARE I	0112001488
Filing Cabinet -Zenith	USAID/ TB CAREI/001	N/A	10.03.2012	300,000	45,763	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Dell Laptop	USAID/ TB CAREI/003	9D797RI	21.03.2012	2,880,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laserjet printer	USAID/ TB CAREI/004	CNCF322319	21.03.2012	1,200,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/ TBCAREI/009	CNU2112540	26.04.2012	2,129,400	0.00	KCCA Supervisors	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/ TBCAREI/010	CNU21125PP	26.04.2012	2,129,400	0.00	KCCA Supervisors	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/ TBCAREI/005	CNU2030LLS	05.04.2012	2,129,400	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/ TBCAREI/006	CNU2030MG6	05.04.2012	2,129,400	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Desktop (Monitor,Keyboard&CPU)	USAID/ TBCAREI/008	CNC128POK2/CZC139017F	05.04.2012	2,047,500	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Desktop (Monitor,Keyboard&CPU)	USAID/ TBCAREI/011	CNC128NZX2/CZC13901VF	05.04.2012	2,047,500	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Printer HP	USAID/ TBCAREI/012	SCNCK825581	05.04.2012	1,078,350	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/ TBCAREI/007	CNU2030LL5	05.04.2012	2,129,400	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/ TBCAREI/013	CNU2081XY4	23.05.2012	2,129,400	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
4 Work station	USAID/ TBCAREI/014A/B/C/D	TG 1400 compact desks + TG 4000 Cherry + Drawers	28.05.2012	2,663,900	479,502	Wandegeya Office	Good	Not decided	KNCV/TB CARE I	2270000799
4 Office chairs	USAID/TBCAREI/034-037	Low back black G331L	28.05.2012	835,422	150,376	Wandegeya Office	Good	Not decided	KNCV/TB CARE I	2270000799
4stackable chairs	USAID/TBCAREI/038-041	Stackable chair BS 216	28.05.2012	441,356	79,444	Wandegeya Office	Good	Not decided	KNCV/TB CARE I	2270000799
Photocopier	USAID/TBCAREI/015	QLM1645015	29.05.2012	3,156,614	568,190	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Filing Cabinet	USAID/TBCAREI/016	FUR-GDJ-FCA-FILING	30.05.2012	398,305	71,695.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Scanner	USAID/TBCAREI/017	SCA-HPC-SCA-SCANNER G40	30.05.2012	430,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Camera		08/2013	12.06.2012	625,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Fridge	USAID/TBCAREI/022	Sharp SJK68	10.07.2012	2,372,881	427,119	Mulago hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Safe	USAID/TBCAREI/025	BS-1-10	30.07.2012	1,186,441	213,559	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Coloured printer	USAID/TBCAREI/028	CNCJ103094	24.07.2012	1,390,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Iphone 4s		013073003223874	17.08.2012	2,100,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Filing Cabinet	USAID/TBCAREI/023	N/A	07.08.2012	542,373	97,627	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Filing Cabinet	USAID/TBCAREI/024	N/A	07.08.2012	542,373	97,627	Kololo Office				
Office conference table	USAID/TBCAREI/027	N/A	17.08.2012	792,016	142,562	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Office cupboard	USAID/TBCAREI/026	N/A	17.08.2012	237,605	42,769	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799

Office desk	USAID/TBCAREI/030	N/A	13.09.2012	402,542	72,458	NTLP Wandegeya	Good	Not decided	KNCV/TB CARE I	2270000799
Medium back chair	USAID/TBCAREI/019	N/A	13.09.2013	211,864	38,136	NTLP Wandegeya	Good	Not decided	KNCV/TB CARE I	2270000799
Desk phone	USAID/TBCAREI/029	N/A	19.04.2012	120,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Saachi Fridge	USAID/TBCAREI/031	N/A	16.10.2012	483,051	86,949	Kitgum Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Saachi Fridge	USAID/TBCAREI/032	N/A	16.10.2012	483,051	86,949	Mbarara Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Clinical Audiometer	USAID/TBCAREI/033	S/N 0898508	02.11.2012	13,719,867	0.00	Mulago hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Desktop (Monitor,Keyboard&CPU)	USAID/TBCAREI/055	37579273165	21.11.2012	1,150,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/TBCAREI/042	2CE2373WK4	19.04.2013	2,204,496	0.00	Dr. Saul (MDR TB Consultant)	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/TBCAREI/043	2CE2373WMM	19.04.2013	2,204,496	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/TBCAREI/044	2CE2373WMF	19.04.2013	2,204,496	0.00	Mbarara Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
HP Laptop	USAID/TBCAREI/045	2CE2373WM9	19.04.2013	2,204,496	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Desktop (Monitor,Keyboard&CPU)	USAID/TBCAREI/046	TRF2520 JMC	19.04.2013	2,195,200	0.00	Kololo Office	Good			2270000799
Desktop (Monitor,Keyboard&CPU)	USAID/TBCAREI/047	TRF2360 50P	19.04.2013	2,195,200	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Desktop (Monitor,Keyboard&CPU)	USAID/TBCAREI/123	TRF2360 4XL	19.04.2013	2,047,500	0.00	Kitgum Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Desktop (Monitor,Keyboard&CPU)	USAID/TBCAREI/047	TRF2360 50P	19.04.2013	2,047,500	0.00	Mulago hospital	Good	Not decided	KNCV/TB CARE I	2270000799
UPS	USAID/TBCAREI/048	53EA08900	01.02.2013	310,500	55,890	Kitgum Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
UPS	USAID/TBCAREI/049	53EA08859	01.02.2013	310,500	55,890	Mulago hospital	Good	Not decided	KNCV/TB CARE I	2270000799
3 stackable chairs	USAID/TBCAREI/051 - 053	Stackable chair S 16	22.02.2013	378,000	57,660	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Scanner	USAID/TBCAREI/050	CN261E22CC	27.02.2013	225,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Photocopier	USAID/TBCAREI/054	QLM1645138	28.02.2013	3,754,588	675,826	Kololo Office	Good	Not decided	KNCV/TB CARE I	2270000799
Printer HP	USAID/TBCAREI/105	VNC4L37833	16.03.2013	997,000	0.00	mULAGO Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Printer HP	USAID/TBCAREI/106	VNC3525177	16.03.2013	997,000	0.00	Mbarara Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Printer HP	USAID/TBCAREI/107	VNC 4L37830	16.03.2013	997,000	0.00	Kitgum Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
8 stackable chairs	USAID/TBCAREI/108-	Stackable chair S 16	18.03.2013	854,240	153,760	Mulago hospital	Good	Not decided	KNCV/TB CARE I	2270000799
39 beds and mattresses	USAID/TBCAREI/056-		04.03.2013	64,350,000	0.00	Mulago hospital	Good	Not decided	KNCV/TB CARE I	2270000799
10 beds and mattresses	USAID/TBCAREI/095-104		04.03.2013	16,500,000	0.00	Mbarara Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Scanner	USAID/TBCAREI/122			225,000	0.00	Kitgum Hospital	Good		KNCV/TB CARE I	2270000799
Paper Shredder	USAID/TBCAREI/121			224,577	40,423	Kololo Office		Not decided	KNCV/TB CARE I	2270000799
Fridge LG	USAID/TBCAREI/119	S/N 301PRGN023695	17.04.2013	1,694,916	305,084	Kitgum Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Fridge LG	USAID/TBCAREI/120		17.04.2013	1,694,916	305,084	Mulago hospital	Good	Not decided	KNCV/TB CARE I	2270000799
Fridge LG	USAID/TBCAREI/124		17.04.2013	1,694,916	305,084	Mbarara Hospital	Good	Not decided	KNCV/TB CARE I	2270000799
GPS Trimble Juno 3B	USAID/TBCAREI/126		08.04.2013	4,033,800	582,714	Kitgum Hospital	Good	Not decided	KNCV/TB CARE I	Not yet insured
GPS Trimble Juno 3B	USAID/TBCAREI/127		08.04.2013	4,033,800	582,714	Mulago hospital	Good	Not decided	KNCV/TB CARE I	Not yet insured
GPS Trimble Juno 3B	USAID/TBCAREI/128	S/N 31000122900233	08.04.2013	4,033,800	582,714	Kololo Office	Good	Not decided	KNCV/TB CARE I	Not yet insured
GPS Trimble Juno 3B	USAID/TBCAREI/129	S/N 31000122900236	08.04.2013	4,033,800	582,714	Kololo Office	Good	Not decided	KNCV/TB CARE I	Not yet insured
GPS Trimble Juno 3B	USAID/TBCAREI/125		08.04.2013	4,033,800	582,714	Mbarara Hospital	Good	Not decided	KNCV/TB CARE I	Not yet insured
ArcGIS software			08.04.2018	4,860,000	0.00	Kitgum Hospital	Good	Not decided	KNCV/TB CARE I	Not yet insured
ArcGIS software			08.04.2018	4,860,000	0.00	Mulago hospital	Good	Not decided	KNCV/TB CARE I	Not yet insured
ArcGIS software			08.04.2018	4,860,000	0.00	Mbarara Hospital	Good	Not decided	KNCV/TB CARE I	Not yet insured
ArcGIS software			08.04.2018	4,860,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	Not yet insured
ArcGIS software			08.04.2018	4,860,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	Not yet insured
ArcGIS software			08.04.2018	4,860,000	0.00	Kololo Office	Good	Not decided	KNCV/TB CARE I	Not yet insured